SCAN! Please forward case and paper to address shown below.

DATE		:	· 	Paper No.:
TO SPE OF	F	: ART UNIT	Wityshyn	Michael
SUBJECT		: Request for Certificate of Correct		
Please re	espo	and to this request for a ce	rtificate of correction	n within 7 days.
Please re correction	eviev n. P	w the requested changes/o	corrections as show (see below) and for	n in the attached certificate of ward it with the file to:
Ce	ertifi	cates of Correction Bran	nch (CofC)	
So	outh	Tower - 9A22	•	
Pa	ılmi I	Location 7580		• • •
	ı	•	•	•
			•	
		•		HENRY RANDALL
				Certificates of Correction Branch
•				
•				703-308-9390 ext
Thank Yo	ou F	For Your Assistance		
The requ	est noision	For Your Assistance for issuing the above-identhe appropriate box. Approved	entified correction All changes	703-308-9390 ext
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